Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

BRA 403-00/03306.

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
			(Column 1)		(Column 2)			TYPE		OR			
TOTAL CLAIMS			5			i	<u>.</u>	RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEI	385.00	OR	BASIC FEE	770.00	
TC	TAL CHARGE	ABLE CLAIMS	minus 20=		*6			X\$ 9=		OR	X\$18=		
INE	DEPENDENT C	LAIMS	/ minus 3 =		0			X43=		OR	X86=		
ML	JLTIPLE DEPEN	NDENT CLAIM P	RESENT					+145=		OR	+290=	·	
* If	the difference	in column 1 is	ero, enter	"0" in c	column 2	į	TOTAL	388.0	4 1	TOTAL			
CLAIMS AS AMENDED - PART II									17/0.3	_	OTHER	THAN	
		(Column 1)		nn 2)	(Column 3)	<u> </u>	SMALL	ENTITY	OR	SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHI NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=]	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	CL AIAA	=	[X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=		
		L	TOTAL		OR	TOTAL ADDIT. FEE							
(Column 1) (Column 2) (Column 3)											ADDII. FEET		
В	· · · · · · · · · · · · · · · · · · ·	CLAIMS REMAINING		HIGHE	ST] г		ADDI-	1	-	ADDI-	
AMENDMENT		AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Ind pendent	*	Minus	***		=	ĮΓ	X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
							L	+145=		OR	+290=		
		Al	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE							
(Column 1) (Column 2) (Column 3)													
AMENDMENT C	•	CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIOI PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
* 14	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=		
**	**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT. FEE		
T	he "Highest Numi	nber Previously Paid ber Previously Paid	io For IN THIS For" (Total or	SPACE is Independer	iess than it) is the i	i 3, enter "3." highest number		DIT. FEE L	ropriate box				